OND DEPARTMENT TRAFFIC CRASH REPORT \*DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT 22MPD1909 OH -3 X PHOTOS TAKEN UNIT IN ERROR NUMBER OF UNITS REPORTING AGENCY NAME \* HIT/SKIP OH-1P OTHER NCIC \* SECONDARY CRASH 98 - ANIMAL - SOLVED 1 99 - UNKNOWN PRIVATE PROPERTY Millersburg 03801 2 - UNSOLVED LOCALITY\* 1 - CITY COUNTY\* CRASH SEVERITY LOCATION: CITY. VILLAGE. TOWNSHIP\* CRASH DATE / TIME\* 1 - FATAL 2 - VILLAGE 3 - TOWNSHIP 38 Millersburg 5 11/18/2022 08:00 2 - SERIOUS INJURY - NORTH LOCATION ROAD NAME SUSPECTED ROUTE TYPE ROUTE NUMBER PREFIX 1 ROAD TYPE LATITUDE DECIMAL DEGREES SOUTH EAST 3 - MINOR INJURY 40.554280 ST Clay Street SUSPECTED - WEST 4 - INJURY POSSIBLE ROUTE TYPE ROUTE NUMBER REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #) PREFIX 1 - NORTH ROAD TYPE LONGITUDE DECIMAL DEGREES SOUTH 5 - PROPERTY DAMAGE 3 - EAST ST -81.917361 Jackson Street INTERSECTION RELATED REFERENCE POINT DIRECTION FROM REFERENCE ROUTE TYPE ROAD TYPE 1 - INTERSECTION AL - ALLEY HW - HIGHWAY RD - ROAD WITHIN INTERSECTION OR ON APPROACH 1 - NORTH IR - INTERSTATE ROUTE (TP) 1 | 2 - MILE POST AV - AVENUE LA - LANE SQ - SQUARE 2 - SOUTH US - FEDERAL US ROUTE 3 - EAST BI - ROLLEVARD MP - MILEPOST ST - STREET 3 - HOUSE # WITHIN INTERCHANGE AREA NUMBER OF APPROACHES 4 - WEST SR - STATE ROUTE CR - CIRCLE OV - OVAL TE - TERRACE DISTANCE FROM REFERENCE DISTANCE UNIT OF MEASURE **ROADWAY** CT - COURT PK - PARKWAY TL - TRAIL CR - NUMBERED COUNTY ROUTE 1 - MILES DR - DRIVE PI - PIKE WA - WAY TR - NUMBERED TOWNSHIP ROADWAY DIVIDED 2 - FEET HE - HEIGHTS PL - PLACE 50.00 3 - YARDS ROUTE LOCATION OF FIRST HARMFUL EVENT MANNER OF CRASH COLLISION/IMPACT DIRECTION OF TRAVEL MEDIAN TYPE 1 - ON ROADWAY 9 - CROSSOVER 1 - NOT COLLISION 4 - REAR-TO-REAR 1 - NORTH 1 - DIVIDED FLUSH MEDIAN 7 1 | 2 - ON SHOULDER 10 - DRIVEWAY/ALLEY ACCESS BETWEEN 5 - BACKING 2 - SOUTH ( <4 FEET ) 3 - IN MEDIAN 11 - RAILWAY GRADE CROSSING TWO MOTOR 3 - EAST 6 - ANGLE 2 - DIVIDED FLUSH MEDIAN 4 - ON ROADSIDE VEHICLES IN 12 - SHARED USE PATHS OR 4 - WEST (≥4 FEET) 7 - SIDESWIPE, SAME DIRECTION TRANSPORT 5 - ON GORE TRAILS 3 - DIVIDED, DEPRESSED MEDIAN 8 - SIDESWIPE, OPPOSITE DIRECTION 6 - OUTSIDE TRAFFIC WAY 13 - BIKE LANE 2 - REAR-END 4 - DIVIDED RAISED MEDIAN 3 - HEAD-ON 7 - ON RAMP 14 - TOLL BOOTH 9 - OTHER / UNKNOWN (ANY TYPE) 8 - OFF RAMP 99 - OTHER / UNKNOWN 9 - OTHER / UNKNOWN CONDITIONS SURFACE WORK ZONE RELATED WORK ZONE TYPE LOCATION OF CRASH IN WORK ZONE CONTOUR 1 - LANE CLOSURE 1 - BEFORE THE 1ST WORK ZONE 1 2 1 WORKERS PRESENT WARNING SIGN 2 - LANE SHIFT/ CROSSOVER STRAIGHT 2 - ADVANCE WARNING AREA 1 - DRY CONCRETE LAW ENFORCEMENT PRESENT 3 - WORK ON SHOULDER LEVEL 2 - WET BLACKTOP, 3 - TRANSITION AREA OR MEDIAN STRAIGHT BITUMINOUS 3 - SNOW 4 - ACTIVITY AREA 4 - INTERMITTENT OR MOVING WORK GRADE ASPHALT ACTIVE SCHOOL ZONE 4 - ICE 5 - TERMINATION AREA 5 - OTHER - BRICK/BLOCK CURVE LEVEL 5 - SAND, MUD, DIRT, OIL, GRAVEL - SLAG , GRAVEL, 4 - CURVE GRADE LIGHT CONDITION WEATHER STONE 6 - WATER (STANDING, 9 - OTHER 1 - DAYLIGHT 1 - CLEAR 6 - SNOW - DIRT MOVING) /UNKNOWN 2 - DAWN/DUSK 2 - CLOUDY 7 - SEVERE CROSSWINDS - OTHER 7 - SLUSH 3 - DARK - LIGHTED ROADWAY 3 - FOG, SMOG, SMOKE 8 - BLOWING SAND, SOIL, DIRT, SNOW / UNKNOWN 9 - OTHER / UNKNOWN 4 - DARK - ROADWAY NOT LIGHTED 4 - RAIN 9 - FREEZING RAIN OR FREEZING DRIZZLE 5 - DARK - UNKNOWN ROADWAY LIGHTING 5 - SLEET, HAIL 99 - OTHER / UNKNOWN 9 - OTHER / UNKNOWN NARRATIVE Unit number two was stopped facing Northbound in traffic on South Clay street in the straight / right turn lane of travel. Unit unit one was Northbound in the left turn lane operating a plow truck. The plow on unit number one was left of center and struck unit number two. South Clay street DISPATCH DATE / TIME CRASH REPORTED DATE / TIME ARRIVAL DATE / TIME REPORT TAKEN BY SCENE CLEARED DATE / TIME **X** POLICE AGENCY 11/18/2022 08:15 11/21/2022 08:17 11/21/2022 08:32 11/21/2022 08:48 MOTORIST

CHECKED BY OFFICER'S NAME\*

CHECKED BY OFFICER'S BADGE NUMBER\*

TOTAL TIME

0

OTHER

30

OADWAY CLOSED INVESTIGATION TIME

OFFICER'S NAME\*

OFFICER'S BADGE NUMBER\*

101

Herman, Kim

TOTAL

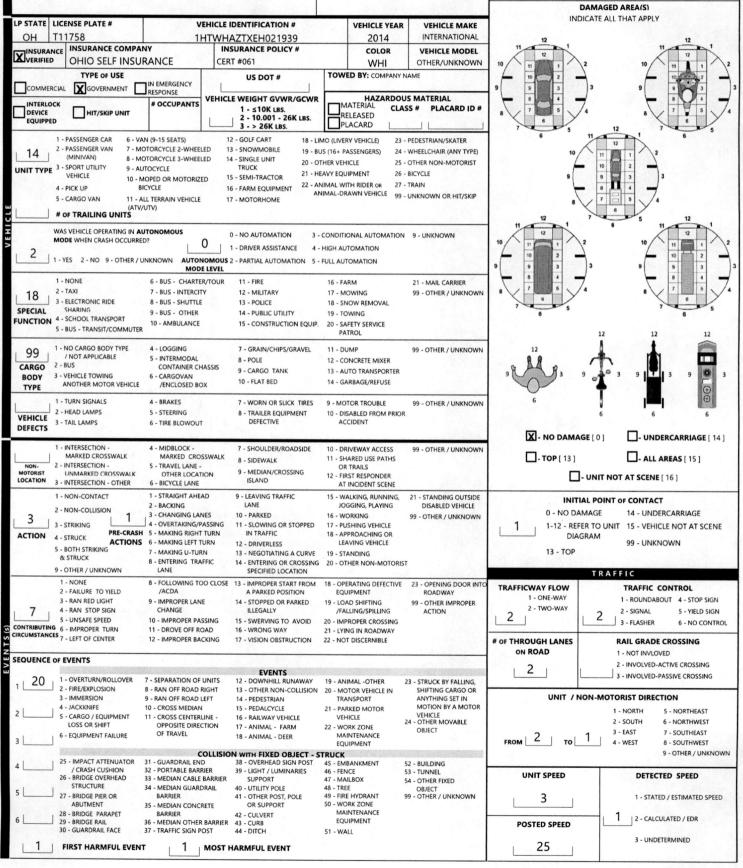
MINUTES

61

SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO

ODPS)

OH OF	O DEPARTMENT UNIT							ORT NUMBER		
ω								PD1909		
UNIT#	OWNER NAME: LAST, FIRST, N	MIDDLE ( SAME AS DRIVER)		OWNER PHONE:INCLUDE AREA CODE ( SAME AS DRIVER)			D A M A G E  DAMAGE SCALE			
	ODOT DISTRICT 11, ADDRESS: STREET, CITY, STATE, ZI	P ( SAME AS DRIVER)		3	30-6/4	1-1906	1 - NONE	3 - FUNCTIONAL DAMAGE		
2201 RI	EISER AVE SE, NEW PH	ILADELPHIA, OH,	44663				2 - MINOR DAMAGE	4 - DISABLING DAMAGE		
COMMER	CIAL CARRIER: NAME, ADDRESS	S, CITY, STATE, ZIP		COMMERCIAL CA	ARRIER PH	ONE: INCLUDE AREA CODE	9 - UNK			
								D AREA(S) L THAT APPLY		
OH	T11758		LE IDENTIFICATION # /HAZTXEH021939	VEHICL 20		INTERNATIONAL				
	INSURANCE COMPAN		INSURANCE POLICY #	COI		VEHICLE MODEL	11 12	11 12 1		
VERIFI		RANCE	CERT #061	w		OTHER/UNKNOWN	10 11 1 2	10 11 1 2		
Псомм	TYPE OF USE	IN EMERGENCY	US DOT #	TOWED BY: CO	MPANY N	AME	9 9 3			
INTERI DEVICE EQUIPE	LOCK HIT/SKIP UNIT	# OCCUPANTS VEH	ICLE WEIGHT GVWR/GCWR  1 - ≤10K LBS. 2 - 10.001 - 26K LBS. 3 - > 26K LBS.	MATERIAL RELEASED PLACARD	CLAS	S MATERIAL SS # PLACARD ID #	8 7 6 4	8 7 9 5		
	(MINIVAN) 8 - MC	OTORCYCLE 2-WHEELED OTORCYCLE 3-WHEELED TOCYCLE OPED OR MOTORIZED CYCLE LL TERRAIN VEHICLE UTV)	14 - SINGLE UNIT TRUCK 20 - O 15 - SEMI-TRACTOR 21 - HI 16 - FARM FOUIPMENT 22 - AI	US (16+ PASSENGERS THER VEHICLE EAVY EQUIPMENT NIMAL WITH RIDER O NIMAL-DRAWN VEHI	25 - 26 - R 27 -	WHEELCHAIR (ANY TYPE) OTHER NON-MOTORIST BICYCLE TRAIN UNKNOWN OR HIT/SKIP	10 9 9 8 7	1 2 3 3 3 4 6 5 5 12		
2	WAS VEHICLE OPERATING IN AL MODE WHEN CRASH OCCURRED 1 - YES 2 - NO 9 - OTHER / U	0	1 - DRIVER ASSISTANCE 4 -	CONDITIONAL AUTO HIGH AUTOMATION		9 - UNKNOWN	11 12 1 10 11 12 2 9 9 3 3	9 9 9 3		
18 SPECIAL FUNCTIO	1 - NONE 2 - TAXI 3 - ELECTRONIC RIDE SHARING N 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER	6 - BUS - CHARTER/TOU 7 - BUS - INTERCITY 8 - BUS - SHUTTLE 9 - BUS - OTHER 10 - AMBULANCE	IR 11 - FIRE 12 - MILITARY 13 - POLICE 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIP.	16 - FARM 17 - MOWING 18 - SNOW REMO 19 - TOWING 20 - SAFETY SERVI PATROL		21 - MAIL CARRIER 99 - OTHER / UNKNOWN	8 7 6 5	8 7 6 5 4 7 6 5 12		
99 CARGO BODY TYPE	1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	4 - LOGGING 5 - INTERMODAL CONTAINER CHASSIS 6 - CARGOVAN /ENCLOSED BOX	7 - GRAIN/CHIPS/GRAVEL 8 - POLE 9 - CARGO TANK 10 - FLAT BED	11 - DUMP 12 - CONCRETE M 13 - AUTO TRANS 14 - GARBAGE/REI	PORTER	99 - OTHER / UNKNOWN	9 3 9	3 9 3 3		
VEHICLE		4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT	7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE	9 - MOTOR TROUB 10 - DISABLED FRO ACCIDENT		99 - OTHER / UNKNOWN	6 6 6	6 6 6		
NON- MOTORIST LOCATION	1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK 3 - INTERSECTION - OTHER	4 - MIDBLOCK - MARKED CROSSWAI 5 - TRAVEL LANE - OTHER LOCATION 6 - BICYCLE LANE	7 - SHOULDER/ROADSIDE 8 - SIDEWALK 9 - MEDIAN/CROSSING ISLAND	10 - DRIVEWAY AC 11 - SHARED USE OR TRAILS 12 - FIRST RESPON	PATHS IDER	99 - OTHER / UNKNOWN	<b>□-TOP</b> [13]	OT AT SCENE [16]		
3 ACTION	1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING PRE-CRASH	6 - BICYCLE LANE  1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSIN 5 - MAKING RIGHT TURN 6 - MAKING LETT TURN 8 - ENTERING U-TURN 8 - ENTERING TRAFFIC LANE	9 - LEAVING TRAFFIC LANE 10 - PARKED G 11 - SLOWING OR STOPPED	AT INCIDENT:  15 - WALKING, RU JOGGING, PLA  16 - WORKING  17 - PUSHING VEH  18 - APPROACHIN LEAVING VEHI  19 - STANDING  20 - OTHER NON-	NNING, YING IICLE G OR CLE	21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN	0 - NO DAMAGE 1-12 - REFER TO UN DIAGRAM 13 - TOP	T OF CONTACT  14 - UNDERCARRIAGE  IIT 15 - VEHICLE NOT AT SCENE  99 - UNKNOWN		
	J - OTHER / UNKNOWN	DAINE	SPECIFIED LOCATION				TRA	FFIC		



OHO DEPARTMENT OF PUBLIC SAFETY BAFETY - BENTHE - PROTECTION	U	NI	Т
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LP STATE LICENSE PLATE #

JIE9532

INSURANCE VERIFIED

COMMERCIAL

DEVICE

FOUIPPED

FRANKS, MICHAEL, L

OWNER ADDRESS: STREET, CITY, STATE, ZIP ( SAME AS DRIVER) 46520 CR 405, COSHOCTON, OH, 43812 COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIF

INSURANCE COMPANY

**NATIONWIDE** 

TYPE OF USE

GOVERNMENT

HIT/SKIP UNIT

# OF TRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?

1 - YES 2 - NO 9 - OTHER / UNKNOWN

1 - PASSENGER CAR

2 - PASSENGER VAN

(MINIVAN)

4 - PICK UP

1 - NONE

2 - TAXI

2 - BUS

3 - ELECTRONIC RIDE

4 - SCHOOL TRANSPORT

1 - NO CARGO BODY TYPE

/ NOT APPLICABLE

3 - VEHICLE TOWING

1 - TURN SIGNALS

1 - INTERSECTION

2 - INTERSECTION

1 - NON-CONTACT

2 - NON-COLLISION

5 - BOTH STRIKING

9 - OTHER / UNKNOWN

2 - FAILURE TO YIELD

3 - RAN RED LIGHT

4 - RAN STOP SIGN

1 - OVERTURN/ROLLOVER

5 - CARGO / EQUIPMENT

6 - FOUIPMENT FAILURE

25 - IMPACT ATTENUATOR

/ CRASH CUSHION

26 - BRIDGE OVERHEAD

STRUCTURE

27 - BRIDGE PIER OR

ABUTMENT

28 - BRIDGE PARAPET

30 - GUARDRAIL FACE

FIRST HARMFUL EVENT

LOSS OR SHIFT

2 - FIRE/EXPLOSION

- IMMERSION

4 - JACKKNIFE

5 - UNSAFE SPEED

3 - STRIKING

& STRUCK

1 - NONE

CONTRIBUTING 6 - IMPROPER TURN
CIRCUMSTANCES 7 - LEFT OF CENTER

SEQUENCE OF EVENTS

4 - STRUCK

MARKED CROSSWALK

3 - INTERSECTION - OTHER

UNMARKED CROSSWALK

11

**ACTIONS** 

2 - HEAD LAMPS

3 - TAIL LAMPS

5 - BUS - TRANSIT/COMMUTER

1

SPECIAL

FUNCTION

1

CARGO

BODY

VEHICLE

DEFECTS

LOCATION

4

**ACTION** 

5 - CARGO VAN

UNIT TYPE 3 - SPORT UTILITY

OWNER NAME: LAST, FIRST, MIDDLE ( SAME AS DRIVER)

IN EMERGENCY RESPONSE

6 - VAN (9-15 SEATS)

9 - AUTOCYCLE

BICYCLE

7 - MOTORCYCLE 2-WHEELED

8 - MOTORCYCLE 3-WHEELED

10 - MOPED OR MOTORIZED

0

MODE LEVEL

6 - BUS - CHARTER/TOUR

7 - BUS - INTERCITY

8 - BUS - SHUTTLE

9 - BUS - OTHER

10 - AMBULANCE

4 - LOGGING

5 - INTERMODAL

6 - CARGOVAN

5 - STEERING

6 - TIRE BLOWOUT

4 - MIDBLOCK -

5 - TRAVEL LANE -

6 - BICYCLE LANE

2 - BACKING

PRE-CRASH 5 - MAKING RIGHT TURN

LANE

/ACDA

CHANGE

9 - IMPROPER LANE

10 - IMPROPER PASSING

12 - IMPROPER BACKING

11 - DROVE OFF ROAD

7 - SEPARATION OF UNITS

8 - RAN OFF ROAD RIGHT

- RAN OFF ROAD LEFT

11 - CROSS CENTERLINE -

31 - GUARDRAIL END 32 - PORTABLE BARRIER

33 - MEDIAN CABLE BARRIER

- MEDIAN OTHER BARRIER

34 - MEDIAN GUARDRAIL

35 - MEDIAN CONCRETE

37 - TRAFFIC SIGN POST

1

RARRIER

RARRIER

OPPOSITE DIRECTION

10 - CROSS MEDIAN

OF TRAVEL

1 - STRAIGHT AHEAD

CHANGING LANES

4 - OVERTAKING/PASSING

6 - MAKING LEFT TURN

8 - ENTERING TRAFFIC

8 - FOLLOWING TOO CLOSE

7 - MAKING U-TURN

CONTAINER CHASSIS

MARKED CROSSWALK

OTHER LOCATION

/ENCLOSED BOX

11 - ALL TERRAIN VEHICLE

# OCCUPANTS

**VEHICLE IDENTIFICATION #** 

1FT7W2B65HED06104

INSURANCE POLICY #

US DOT #

VEHICLE WEIGHT GVWR/GCWR

1 - ≤10K LBS.

3 - > 26K LBS.

12 - GOLF CART

13 - SNOWMOBILE

15 - SEMI-TRACTOR

17 - MOTORHOME

16 - FARM EQUIPMENT

0 - NO AUTOMATION

1 - DRIVER ASSISTANCE

12 - MILITARY

14 - PUBLIC UTILITY

13 - POLICE

8 - POLE

9 - CARGO TANK

10 - FLAT BED

AUTONOMOUS 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION

15 - CONSTRUCTION EQUIP.

7 - GRAIN/CHIPS/GRAVEL

7 - WORN OR SLICK TIRES

8 - TRAILER EQUIPMENT

7 - SHOULDER/ROADSIDE

9 - MEDIAN/CROSSING

11 - SLOWING OR STOPPED IN TRAFFIC

13 - NEGOTIATING A CURVE

14 - ENTERING OR CROSSING

SPECIFIED LOCATION

13 - IMPROPER START FROM

14 - STOPPED OR PARKED

15 - SWERVING TO AVOID

17 - VISION OBSTRUCTION

EVENTS

12 - DOWNHILL RUNAWAY

13 - OTHER NON-COLLISION

ILLEGALLY

16 - WRONG WAY

14 - PEDESTRIAN

15 - PEDALCYCLE

16 - RAILWAY VEHICLE

18 - ANIMAL - DEER

COLLISION WITH FIXED OBJECT - STRUCK

39 - LIGHT / LUMINARIES

41 - OTHER POST, POLE OR SUPPORT

SUPPORT

40 - UTILITY POLE

42 - CULVERT

44 - DITCH

MOST HARMFUL EVENT

38 - OVERHEAD SIGN POST

A PARKED POSITION

9 - LEAVING TRAFFIC

DEFECTIVE

8 - SIDEWALK

ISLAND

LANE

10 - PARKED

12 - DRIVERLESS

14 - SINGLE UNIT

TRUCK

2 - 10 001 - 26K IRS

UNIT#

## LOCAL REPORT NUMBER

18 - LIMO (LIVERY VEHICLE)

19 - BUS (16+ PASSENGERS)

22 - ANIMAL WITH RIDER OR

4 - HIGH AUTOMATION

20 - OTHER VEHICLE

21 - HEAVY EQUIPMENT

			22MPD1909							
OWNER PHONE:INCLUDE AREA CODE ( SAME AS DRIVER)			DAMAGE							
		4-8599		DAMAGE S						
-	740-23	4-0333	1 - NONE		3 - FUNCTIONAL DAMAGE					
-	MATRICIAL CARRIAGO DA	ONE MELLOS COST	2 - MINOR D	9 - UNKNO	4 - DISABLING DAMAGE WN					
Co	MMERCIAL CARRIER PH	HONE: INCLUDE AREA CODE		DAMAGED A						
	VEHICLE YEAR	VEHICLE MAKE		DICATE ALL T						
	2017	FORD	12		12					
	COLOR	VEHICLE MODEL	1 2		11 12 1					
	BLU	F-250	10 11 1	2	10 11 1 1 2					
TOW	ED BY: COMPANY	NAME	10 2	-	10, 2					
ᆙ	AATEDIAL	JS MATERIAL .SS # PLACARD ID #	9 9 3 4 7 5 5	)3 /4	9 9 3 4 7 5 5 4					
		- PEDESTRIAN/SKATER	6	11 12	6					
		- WHEELCHAIR (ANY TYPE) - OTHER NON-MOTORIST	10/	\"B	1 2					
OTHER VEI HEAVY EQ		- BICYCLE	•	9 9	3 3					
ANIMAL W	/ITH RIDER on 27	- TRAIN		_ : II						
ANIMAL-D	RAWN VEHICLE 99	- UNKNOWN OR HIT/SKIP	12	7 6	5 12					
	IONAL AUTOMATION	9 - UNKNOWN	10 11 12	6	10 11 12 1					
	UTOMATION JTOMATION		10 2	1	10 2					
, ott At			9 9 3	3	9 9 3 3					
16 - F		21 - MAIL CARRIER	7 7 5	/4	7					
	NOWING	99 - OTHER / UNKNOWN	7.00		, 0					
19 - T	OWING		6 5		6 5					
	AFETY SERVICE ATROL			12	12 12					
11 - 0		99 - OTHER / UNKNOWN	12	i						
	ONCRETE MIXER	99 - OTHER / UNKNOWN	8.8	1						
	UTO TRANSPORTER		9 3	9 6 3	9 7 3 9 🗱 3					
14 - G	SARBAGE/REFUSE		0	4	[⊕]					
10 - D	OTOR TROUBLE DISABLED FROM PRIOR CCIDENT	99 - OTHER / UNKNOWN	6	6	6 6					
			□- NO DAMA	AGE [ 0 ]	- UNDERCARRIAGE [ 14 ]					
	PRIVEWAY ACCESS HARED USE PATHS	99 - OTHER / UNKNOWN	□-TOP[13]		- ALL AREAS [ 15 ]					
0	R TRAILS			1						
	IRST RESPONDER T INCIDENT SCENE		is signation —	<b>1-</b> иит иот	AT SCENE [ 16 ]					
	VALKING, RUNNING,	21 - STANDING OUTSIDE	INIT	IAL POINT o	F CONTACT					
	OGGING, PLAYING VORKING	DISABLED VEHICLE  99 - OTHER / UNKNOWN	0 - NO D		14 - UNDERCARRIAGE					
17 - P	USHING VEHICLE				15 - VEHICLE NOT AT SCENE					
	PPROACHING OR EAVING VEHICLE		DIA	AGRAM	99 - UNKNOWN					
E 19 - S	TANDING		13 - TOP							
IG 20 - C	THER NON-MOTORIS	ST		TRAFF	ıc					
	PERATING DEFECTIVE		TRAFFICWAY FLOW		TRAFFIC CONTROL					
	QUIPMENT DAD SHIFTING	ROADWAY  99 - OTHER IMPROPER	1 - ONE-WAY		- ROUNDABOUT 4 - STOP SIGN					
/F	ALLING/SPILLING	ACTION	2 - TWO-WAY	1, / ,	- SIGNAL 5 - YIELD SIGN					
	PROPER CROSSING			-	8 - FLASHER 6 - NO CONTROL					
	OT DISCERNIBLE		# OF THROUGH LANES	R	AIL GRADE CROSSING					
			ON ROAD		NOT INVLOVED					
			2	1	- INVOLVED-ACTIVE CROSSING - INVOLVED-PASSIVE CROSSING					
	NIMAL -OTHER	23 - STRUCK BY FALLING,		3	- INVOLVED-PASSIVE CROSSING					
	OTOR VEHICLE IN PANSPORT	SHIFTING CARGO OR ANYTHING SET IN	UNIT /	иои-мото	RIST DIRECTION					
21 - P/	ARKED MOTOR	MOTION BY A MOTOR VEHICLE			NORTH 5 - NORTHEAST					
	EHICLE ORK ZONE	24 - OTHER MOVABLE OBJECT		2	SOUTH 6 - NORTHWEST					
M	AINTENANCE	Object	FROM 2 TO	1   3-	EAST 7 - SOUTHEAST WEST 8 - SOUTHWEST					
STRUCK					9 - OTHER / UNKNOWN					
	MBANKMENT	52 - BUILDING 53 - TUNNEL			DETECTED COLUM					
47 - M	AILBOX	54 - OTHER FIXED	UNIT SPEED		DETECTED SPEED					
	RE HYDRANT	OBJECT 99 - OTHER / UNKNOWN	. 0		1 - STATED / ESTIMATED SPEED					
	ORK ZONE AINTENANCE									
EC	QUIPMENT	1	POSTED SPEED		2 - CALCULATED / EDR					
51 - W	ALL	10	25		3 - UNDETERMINED					
		1 2 2	25	1						

PA	GE	3	OF	5	

OHRO DEP OF PUBLIC SWATT - SERVE	OND DEPARTMENT MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER 22MPD1909						
UNIT #									$\vdash$						GENDER
1	TAYLOR, TRAVIS, T									06/29/1972				50	М
ADDRESS:	STREET, CITY, STATE, ZIP									CONTACT PHONE - INCLUDE AREA CODE					
4230 SR	60, KILLBUC	CK, OH, 44637		Labor N					330-	276-67	782				
INJURIES								SAFETY EQUIPMENT	DOT-COMPLIANT POSITION AIR BAG USAGE EJECTION TRAP					N TRAPPED	
<b>S</b> 5	вч 1									HELME	1		1 1 1		
OL STATE	OPERATOR LIC	CENSE NUMBER		OFFENS	E CHARG	iED	LOCAL	OFFENSE DESCR	PTION			CITA	CITATION NUMBER		
OH OH	RH682491											25			
OL CLASS	ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIV	/ER RACTED		HOL / DRUG SUSPE		CONDITION	AND DESCRIPTION OF THE PERSON		OL TEST	STATUS	TYPE	TEST(	
1	N	3	BY	RACTED ALCOHOL MARIJUANA  1 OTHER DRUG		1	1	TYPE 1	VALUE	1	1	RESULIS	SELECT UP TO 4		
UNIT #	NAME: LAST,	FIRST, MIDDLE									DATE OF BIRTI			AGE	GENDER
2	FRANKS, M	IICHAEL, L												М	
ADDRESS:	STREET, CITY, ST	TATE, ZIP							CONT	CONTACT PHONE - INCLUDE AREA C			E		
46520 C	R 405, COSH	OCTON, OH, 43812							740-	294-85	599				
INJURIES 5	INJURED EN	AS AGENCY (NAME)					SAFETY EQUIPMENT USED 4		DOT-COMPLIANT POSITION MC HELMET 1			AIR BAG USAGE EJECTION TRAPPED			
OL STATE	OPERATOR LIC	CENSE NUMBER		OFFENS	E CHARG	ED	LOCAL	OFFENSE DESCR	IPTION			CITA	TION N	UMBER	
он он	RS295287						CODE								
OL CLASS	ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIN			IOL / DRUG SUSPE	CTED	CONDITION	ALCOHOL TEST				DRUG TEST(S)		
4	м	3	BY .	RACTED		HOL MARIJU	IANA	1	STATUS	TYPE	VALUE	STATUS	TYPE	RESULTS	SELECT UP TO 4
UNIT #	NAME: LAST, I	FIRST, MIDDLE			OTHE	R DRUG			1		DATE OF BIRTH	1 1	1 1	AGE	GENDER
												•		NOL	GENDER
ADDRESS:	STREET, CITY, ST	ATE, ZIP				~~~			CONTACT PHONE - INCLUDE AREA CODE						
TOR											INCLUDE	AND COD			
INJURIES	S INJURED EMS AGENCY (NAME) TAKEN BY			INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)  SAFETY EQUIPMEN USED			SAFETY EQUIPMENT USED		T-COMPLIA			AG USAGE	EJECTION	N TRAPPED	
OL STATE	OPERATOR LIC	ENSE NUMBER		OFFENSE CHARGED LOCAL OFFEN			OFFENSE DESCRI	IPTION			CITA	CITATION NUMBER			
OL CLASS	ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIV	VER ALCOHOL / DRUG SUSPECTED		CONDITION	A	ALCOHOL TEST			DRUG TEST(S)				
	05		DIST	RACTED	ALCO		ANA		STATUS	TYPE	VALUE	STATUS	TYPE	RESULTS	SELECT UP TO 4
					OTHE									100	
1 - FATAL	JRIES	SEATING POSITION  1 - FRONT - LEFT SIDE	1 - NOT DE	IR BAG		OL CLAS	S	OL RESTRIC						EST STA	ATUS
2 - SUSPECTED	SERIOUS	(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2 - DEPLOY 3 - DEPLOY	ED FRONT		1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER DEVICE		2 - N	1 - NOT DISTRACTED 2 - MANUALLY OPERATING AN 2 - TEST REFUSED				
3 - SUSPECTED	MINOR	3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE	4 - DEPLOYED BOTH			3 - CLASS C 2 - CDL INTRASTAT 3 - CORRECTIVE LE 4 - FARM WAIVER						CONTINUED SAMEL		ED SAMPLE	
4 - POSSIBLE IN	JURY				4 - REGULAR CLASS 5 - EXCEPT CLASS A B (OHIO = D) 6 - EXCEPT CLASS A							/ UNUSABLE 4 - TEST GIVEN,		1/6.1	
5 - NO APPAREN	NT INJURY	6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	5 - M/C MOPED ONLY			& CLASS B BUS 7 - EXCEPT TRACTO		COMMUNICATION DE			LD 5 - IEST GIVEN,				
INJURIES	TAKEN BY	(MOTORCYCLE SIDE CAR)	1 - NOT EJECTED 6 - NO VALID OL			8 - INTERMEDIATE LICENS RESTRICTIONS		5 - OTHER ACTIVITY WITH		WITH AN			0.00		
1 - NOT TRAN /TREATED A		9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION	2 - PARTIALLY EJECTED OL ENDORSEMENT 3 - TOTALLY EJECTED			9 - LEARNER'S PERM RESTRICTIONS	1IT	6 - PASSENGER			1 - NONE 2 - BLOOD 3 - URINE				
2 - EMS	AT SCENE	OF TRUCK CAB 11 - PASSENGER IN	4 - NOT APPLICABLE		M - MOTOPCYCLE ONLY		ONLY			7 - OTHER DISTRACTION INSIDE THE VEHICLE					
3 - POLICE	NKNOWN	OTHER ENCLOSED CARGO	TRAPPED			P - PASSENGER	- PASSENGER 12 - LIMITED - OTHE		R OUTSIDE THE VEHICLE		ICLE	4 - BREATH 5 - OTHER			
	BUS, PICK-UP WITH CAP)		2 - EXTRICATED BY N - TANKER  MECHANICAL MEANS Q - MOTOR SCOOTER			13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND		ND CONDITION		DRUG TEST TYPE					
1 - NONE USED	UNENCLOSED CA		3 - FREED B			R - THREE-WHEEL	TEK	CONTROLS, OR ADAPTIVE DEVI- 14 - MILITARY VEHIC	CES)		PPARENTLY NOR		2 - BLOO 3 - URIN	DD	
2 - SHOULDER E USED	BELT ONLY	14 - RIDING ON VEHICLE EXTERIOR				S - SCHOOL BUS		15 - MOTOR VEHICL WITHOUT AIR B	.ES	3 - E1	MOTIONAL (E.G., PRESSED, ANGRY,		4 - OTH		
3 - LAP BELT ON 4 - SHOULDER 8		(NON-TRAILING UNIT) 15 - NON-MOTORIST				T - DOUBLE & TRI	PLE	16 - OUTSIDE MIRRO 17 - PROSTHETIC AI	OR		STURBED) LNESS			TEST R	ESULT(S)
USED 5 - CHILD RESTR	RAINT SYSTEM	99 - OTHER / UNKNOWN				X - TANKER / HAZ	MAT	18 - OTHER		5 - FE	LL ASLEEP, FAIN'	TED,	2 - BARB	ITURATES	
- FORWARD 6 - CHILD RESTR						GENDE	?			6 - U	NDER THE INFLU		4 - CANN	NABINOIDS	
- REAR FACIN 7 - BOOSTER SE	NG					F - FEMALE	i eri			ALCOHOL 9 - OTHER / UNKNOWN			5 - COCAINE 6 - OPIATES / OPIOIDS		
8 - HELMET USE 9 - PROTECTIVE	D					M - MALE	IOWN				LIT SINKING		7 - OTHE 8 - NEGA	TIVE RESU	LTS
(ELBOWS, KI 10 - REFLECTIVE	NEES, ETC)					U - OTHER / UNKN	NOVIN								
11 - LIGHTING - / BICYCLE C	PEDESTRIAN														
99 - OTHER / UN				A STATE OF											